



Provider Notification – About Your Treatment Request

Dear Provider,

The purpose of this notice is to inform you of San Francisco Health Plan's Long-Term Care Authorization Guidelines.

Prior to admitting a SFHP member to a Long-Term Care Facility, an authorization should be provided by SFHP first. If a member is already a resident at your facility and obtained SFHP coverage later, please notify us to request authorization immediately upon verifying eligibility.

- For Long-Term Care (LTC) Authorizations (initial or continuation of custodial care): Fax a completed Custodial LTC Services Request Form found on our website [here](#) to **1(415) 943-9700**. Custodial LTC authorizations are required for admissions exceeding the month of admission and month after. Initial requests are due prior to the third month of admission.

Notification Timeframe Requirements

- Admissions: Notice is due within five (5) business days of admission.
- Transfers (e.g., to hospital, another SNF, or community via leave of absence): Notice is due immediately, and not to exceed seven (7) calendar days.
- Discharge: Please let us know as soon as the plan is known. SFHP will assist with Transitional Care Services.

Bed Hold & Leave of Absence Requests

- Bed hold and leave of absence durations are authorized in accordance with Cal. Code Regs. tit. 22 § 51535 and 51535.1.
- Requests must be submitted within seven (7) calendar days of the member leaving the facility.
- SFHP must ensure members have received a written notice of their right to exercise the bed hold provision. Requests must include a copy of the written notice.

Please remember to check members' eligibility in the beginning of the month for members that are already in-house. Eligibility can be verified by one of the following methods:

- Online at SFHP's provider portal: sfhpprovider.healthtrioconnect.com
- Interactive Voice Response: **1(415) 547-7810**
- SFHP Member Services: **1(800) 288-5555**

Clinical Documentation and Submission Frequency

- Long-Term Care: Clinical information must be faxed to **1(415) 943-9700** upon reauthorization of custodial care or at the request of SFHP clinical staff.
- The type of clinical information required will depend on the needs of the patient and the services authorized which includes, but is not limited to:
 - Clinical documentation: H&P, MD progress notes, other notes as applicable
 - Minimum Data Set (MDS)
 - Notice of Medicare Non-Coverage (NOMNC) or Advance Beneficiary Notice of Non-Coverage (ABN) if applicable, indicating the last day of last coverage
 - Medi-Cal Long-Term Care Facility Admission and Discharge Notification (MC171) Preadmission Screening and Resident Review (PASRR) as applicable
 - Bed Hold / Leave of Absence Notices
 - Other information as requested

Failure to comply with instructions above or claims submitted prior to the submission of clinical documentation may result in **denial of payment**.

Please note that preauthorization does not guarantee payment. Payment is contingent on clinical review, application of medical necessity criteria and eligibility at the time services are provided.

Thank you for your continued efforts to provide superior care to SFHP members. Please contact SFHP's Long-Term Care Team at **1(415) 615-4530** or longtermcarehelp@sfhp.org with any questions or concerns.

Sincerely,

Long-Term Care Team

San Francisco Health Plan

PO Box 194247

San Francisco, CA 94119

Phone: **1(415) 615-4530**

Long-Term Care Fax: **1(415) 943-9700**